



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 5806

| | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| SERIAL NUMBER 10/531,975 | FILING OR 371(c) DATE 04/20/2005 RULE | CLASS 359 | GROUP ART UNIT 2873 | ATTORNEY DOCKET NO. NL 021095 |
| APPLICANTS Stein Kuiper, Eindhoven, NETHERLANDS; Bernardus Hendrikus Wilhelmus Hendriks, Eindhoven, NETHERLANDS; Rudolph Maria Snoeren, Eindhoven, NETHERLANDS; Willem Gerard Ophey, Eindhoven, NETHERLANDS; | | | | |
| ** CONTINUING DATA ***** This application is a 371 of PCT/IB03/04595 10/17/2003 | | | | |
| ** FOREIGN APPLICATIONS ***** EUROPEAN PATENT OFFICE (EPO) 02079473.1 10/25/2002 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials | | STATE OR COUNTRY NETHERLANDS | SHEETS DRAWING 10 | TOTAL CLAIMS 24 |
| INDEPENDENT CLAIMS 1 | | | | |
| ADDRESS 24737 | | | | |
| TITLE Zoom Lens | | | | |
| FILING FEE RECEIVED 1100 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |